

City of Florida City

Building and Zoning Department

APPLICATION FOR CONDITIONAL OR SPECIAL USE PERMIT

1) PROPERTY: Address: _____
Legal Address: _____

2) OWNER: Name: _____
Address: _____
Identification: _____
Proof of Ownership: _____

3) APPLICANT: Name: _____
Address: _____

Telephone # _____
Identification: _____
Authorization (Attach): _____

4) REQUEST: Use: _____

5) FEE: \$750.00 (includes cost of advertisement) **Required with Application**

6) SIGNATURE(S):

Owner(s)

Date

Name & Title
City of Florida City

Owner(s)

Date

Date Accepted

Applicant

Date

Office Use:

Post to: \$250 Acct. 10
\$500 Acct. 121